Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

■ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A F	or the	e 2018 calendar year, or tax year beginning and endu	ng		
Вс	heck if oplicabl	C Name of organization		D Employer identific	cation number
	Addre	American Legislative Exchange Council			
	Name chang			52-0	140979
	Initial return		n/suite	E Telephone number	1
	Final return			703-	373-0933
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	9,685,279.
	Amen return	Allington, va 22202		H(a) is this a group re	
L	Application pendi		CEO	for subordinates	
		same as C above	\$	H(b) Are all subordinates in	
		empt status X 501(c)(3)	527	1	list (see instructions)
		te: ▶ www.alec.org 1 organization: X Corporation Trust Association Other ▶ 1	I Vaar	H(c) Group exemption 1975	A State of legal domicile: IL
₹ Pa		Summary	L TEAL	or iornation. +575 K	n State of legal dofficile, 22
₹		Briefly describe the organization's mission or most significant activities Assist	Sta	te Legislato	ors,
	•	Congress & the public by sharing research ar	nd e	ducational	info.
Governance	2	Check this box I if the organization discontinued its operations or disposed of			
Gove	3	Number of voting members of the governing body (Part VI, line 1a)		3	23
2 8	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	23
1	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	53
Activities		Total number of volunteers (estimate if necessary)		6	28
		Total unrelated business revenue from Part VIII, column (C), line 12		7a	12,013.
₹ <u> </u>	b	Net unrelated business taxable income from Form 990-T, line 38		7b	
Activities		Contributions and greats (Dort VIII June 1h)	\vdash	Prior Year 8,765,064.	Current Year 8,493,986.
	8 9	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		1,104,038.	1,058,253.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,463.	12,636.	
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		476,674.	-206,957.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,352,239.	9,357,918.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		15,000.	7,500.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ړي	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		4,221,861.	4,353,278.
ıse	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	46,450.	76,098.
Expenses	þ	Total fundraising expenses (Part IX, column (D), line 25) ► 682,634.	-	5 052 004	4 001 700
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	5,953,884.	4,801,792.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A) line 25) Revenue less expenses Subtract line 18 from line 12 RECEIVED	<u> </u>	10,237,195.	9,238,668.
- ,			-	115,044.	119,250.
t Assets or d Balances	00	Total assets (Part X, line 16)	Be	ginning of Current Year 6,438,760.	End of Year 6,371,233.
SSE	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	-	2,167,717.	1,980,940.
Net /		Net assets or fund balances Subtract line 21 from line 20		4,271,043.	4,390,293.
	त्री				
Unde	r pena	ilties of perjury, I declare that I have examined this return, including accompanying schodulos and	statomo	nts, and to the best of my	knowledge and belief, it is
true,	correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which pi	reparer	has any knowledge.	
		Sisa M. Bower		11/07/19	
Sign	1	Signature of officer		Date *	
Here	•	Lasa Bowen, CFO			
		Type or print name and title	- 16	Osto 4	T OTIN
		Print/Type:preparer's name Preparer's signature		Date Check C	PTIN
Paid		Thomas J. Raffa		, scir-cinploy	P00916458 11-1986323
Prep Use		Firm's range Marcum LLP Firm's address 1899 L St., NW, Suite 850		Firm's EIN	TT-T700323
086	omy	Washington, DC 20036		Phone no. (2	02) 227-4000
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
	1 12-3		<u> </u>	771	Form 990 (2018)

Form	1 990 (2018) American Legislative Exchange Council	52-0140979	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission.		
•	The American Legislative Exchange Council (ALEC) is a for	rum for	
	stakeholders to exchange ideas and develop potential solu		
	ALEC's mission is to advance and promote the Jeffersonian		1
	of limited government, free markets and federalism.	<u> </u>	
2	Did the organization undertake any significant program services during the year which were not listed on the	-	
2	prior Form 990 or 990-EZ?	□ vos	X No
	•	res	I III
_	If "Yes," describe these new services on Schedule O		X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L Yes	MO NO
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as r		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expenses, a	and
	revenue, if any, for each program service reported		
4a)
	Task Forces - ALEC's Task Forces provide a forum for leg:		<u> </u>
	the private sector to discuss issues and develop and drag	ft model	
	policies which serve as a public resource. The Task Fore	ces include	the
	following: American City Council Exchange; Civil Justice	e; Commerce,	
	Insurance and Economic Development; Communications and Te	echnology;	
	Criminal Justice Reform; Education and Workforce Develop	nent; Energy	,
	Environment and Agriculture; Health and Human Services;	Federalism a	nd
	International Relations; Tax and Fiscal Policy; and Home:	land Securit	v.
	international networks, take and 110001 10110j, and nome		
45	(Code) (Expenses \$ 1 , 440 , 613 • including grants of \$) (Revenue)	990	815.)
4D	(Code) (Expenses \$1,440,613. including grants of \$) (Revenue Conferences - ALEC holds national conferences, providing		
	current issues with leading experts, public figures and	alected	
	officials. The three national conferences held during 2	018 wore the	
	officials. The three national conferences held during 2	Vational Dol	<u>; </u>
	Spring Task Force Summit, Annual Meeting and States and I	Nacional Poi	·ICy
	Summit Meeting.		
4c	(Code) (Expenses \$1, 261, 593. including grants of \$) (Revenue))
	Public Affairs - ALEC conducts an on-going communication		nat
	promotes policies based on free-market, limited government		
	federalism among elected officials and the private sector	r members of	:
	ALEC and educates the general public on ALEC's institution	onal goals a	ınd
	objectives.		
		····	
		· · · · · · ·	
		 -	
		 -	
4d	Other program services (Describe in Schedule O)	67 620	
	(Expenses \$ 1,247,186 · including grants of \$ 7,500 ·) (Revenue \$ Total program service expenses ▶ 7,606,627 ·	67,638.)	
	Total program service expenses ► 7,606,627.		

Form **990** (2018)

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COHI	990	(2018)

Form 990 (2018) American Legislative Exchange Council Partily Checklist of Required Schedules

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	• • • • • • • • • • • • • • • • • • •		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Х	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_	^	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		х
	public office? If "Yes," complete Schedule C, Part I			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4	х	
_	during the tax year? If "Yes," complete Schedule C, Part II	-		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		х
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
6		6		х
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
8		8		Х
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	_		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
•	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
-	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	, ,		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ŀ		1
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	}		:
	Schedule D, Parts XI and XII	12a		X
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?	1		ł
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	ļ <u>.</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			,,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	l		.
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	١		.
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	ـــا	v	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.0	, v	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			х
	complete Schedule G, Part III	19	 	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21		x
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Form 990 (2018)

	Checklist of Required Schedules (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<u></u>	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		v	
••	Schedule J	23_	X	₩
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		1	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	24a	}	х
h	Schedule K If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	 	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	245		\vdash
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b	<u> </u>	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			l
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			۱
	complete Schedule L, Part II	26_	 -	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		İ	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			v
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	Instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? (fill/or ill complete Schodule / Bert II/	28a		Х
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
Ŭ	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		ļ	
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	- -	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	١	_v	
05-	Part V, line 1	34	X	\vdash
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	\vdash
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	х	ĺ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	335	<u> </u>	
00	If "Yes," complete Schedule R, Part V, line 2	36	х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note, All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners?

b If a least one is reported on line 2a, dot the organization file all required for earlier types. Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e_file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? if "Yes," has it filed a Form 990-T for this year? if "Not" is line 3b, provide an explanation in Schedule O 3b A At any time during the calendary year, did the organization have unreless in, or a signature or other authonity over, a financial account, in a foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts, or organization and financial accounts, or a profiber that see whether tensaction at any time during the tax year? 5b Did sny taxable party notify the organization file Form 888617? 5c Did sny taxable party notify the organization file Form 888617? 5c Did sny taxable party notify the organization file Form 888617? 5c Did sny taxable party notify the organization file Form 888617? 5c Did sny taxable party notify the organization file Form 888617? 5c Did sny taxable party notify the organization file Form 888617? 5c Did sny taxable party notify the organization file Form 888617? 5c Did sny taxable party notify the organization file Form 888617? 5c Did the organization snucled with very solicitation an express statement that such contributions or gifts were not tax deductible? 5c Did the organization state may receive deductible contributions under section 179(c). 5d Did the organization state may receive deductible contributions under section 179(c). 5d Did the organization state may receive deductible contributions under section 179(c). 5d Did the organization self-generation section 45 value of the organization self-generation self-g	1 70	Statements Regarding Other Ins Fillings and Tax Compliance (continued)	<u> </u>			
filed for the calendary year ending with or within the year covered by this return Sa		•	1 1	L. 180	Yes	No
b If a least one is reported on line 2a, did the organization file all required foreign employment tax returns? Note: if the sum of lines 1 and 2a is greater fram 260, you may be required to e_Afe (see instructions) 33 Did the organization have unrelated business gross income of \$1,000 or more during the year? 34 All any time during the calendary earl, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account) or of financial account in a foreign country. 55 Be instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 56 Was the organization a party to a princhiset tax shetler transaction at any time during the tax year? 57 If "Yes" to line 5a or 5b, did the organization file Form 8886-TS 58 If "Yes", a did the organization and the work and the state of the organization about any contributions that were not tax deductable as charitable contributions? 58 If "Yes" and the organization accountly the donor of the value of the goods or services provided? 59 If "Yes" and the organization accountly the donor of the value of the goods or services provided? 50 If "Yes" indicate the number of Forms 8282 filed during the year 50 If "Yes", indicate the number of Forms 8282 filed during the year 50 If "Yes", indicate the number of Forms 8282 filed during the year 50 If "Yes, indicate the number of Forms 8282 filed during the year 51 Did the organization anothly the donor of the value of the goods or services provided? 52 Other organization was easily the provided for the year organization file Form 8282? 51 Did the organization and provided filed intellectual property, did the organization file Form 8282? 52 Did the songanization and provided filed intellectual property, did the organization file Form 8282 filed during the year? 53 Section 801(Filed) grainizations maintaining donor advised funds. Did a donor advised fun	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		1 30 mg		
Note: If the sum of lines It a and 2 as in greater fram 250, you may be required to e_rife (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 If "Yes," has if filled a Form 850-7 for this year? If "Yo," to line 36, provide an explanation in Schedule O 4 A larry time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountly? 4 B If "Yes," enter the name of the foreign country [Image 2] and a shark account, securities account, or other financial accountly? 5 Been instructions for filling requirements for FincREN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5 Was the organization a party to a prohibited tax shelter transaction? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solution and any contributions that were not tax deductibles a charable contributions? 6 Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solution and party for poods and services provided to the payor? 7 Did the organization received educutible contributions under section 170(c). 8 Did the organization received any expert in excess of \$3 made party as a contribution and party for poods and services provided to the payor? 9 Did the organization received any thirds, directly or indirectly, to a personal benefit contract? 9 Did the organization received any personal property or diversity or indirectly, to a personal benefit contract? 9 Did the organization received any thirds, directly or indirectly, to a personal property for which it was requir		· · · · · · · · · · · · · · · · · · ·			_	推卷复型
3 a bit the organization have unrelated business gross income of \$1,000 or more during the year? 4 a Na any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAF) 5 a Was the organization of the foreign country (such as a bank account, securities account, or other financial accounts (FBAF) 5 a Was the organization of the organization have shelter transaction at any time during the tax year? 5 a Was the organization have for the organization file Form 8868.77 5 b Did any taxable party notify the organization file Form 8868.77 5 c If Yea's to line Saor 50, did the organization file Form 8868.77 5 c If Yea's to line Saor 50, did the organization file Form 8868.77 5 c If Yea's to line Saor 50, did the organization file Form 8868.77 5 d Dess the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that the repart that such contributions or grits were not tax deductible? 6 d If Yea's did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 7 d Organizations that may receive deductible as chantable contributions and partly for goods and services provided to the part of the organization network and notify the donor of the value of the goods or services provided? 8 b If Yea's, indicate the number of Forms 8822 filed during the year 9 b If Yea's, indicate the number of Forms 8822 filed during the year 1 but the organization, during the year, pay premiums, directly or indirectly, or a personal benefit contract? 9 b Did the organization netwer and contribution of qualified intellectual property, did the organization file Form 1098.07 8 Sponsoring organizations are contribution of critical property, and the properties of the properties of the properties of the properties of the pro	b					Charles de la company
b If "Yes," has it filled a Form 900-T for this year? If "No" to line 3b, provide an explanation in Scinedule O 4a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, sociuntes account, or other financial account)? 5b If "Yes," reter the name of the foreign country 5ee instructions for filling requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6i If "Yes" to line Sai or 5b, did the organization file Form 8886-17? 6a Does the organization have annual gross receives that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chantable contributions? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or grifs were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d Did the organization reterve a payment in excess of 375 made party as a contribution of quantian reterve apparent in excess of 375 made party as a contribution of quantian developed to file Form 8282? 7d If "Yes," indicate the number of Forms 8282 filed during the year 9d Did the organization reterve any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization receive any funds, directly or indire	_		s)		12 3 K	347
4a A any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (when he is a bank account, secunds account, or other financial account); or financial account in a financial account in a foreign country when he is a bank account, secunds account, or other financial accounts; of the secund in a financial account in a financial account in a financial account in a financial account in the secund in the sec	-				_	<u> X</u>
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	990 (2018) American Legislative Exchange Council 52-0140			age 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No" re	spons	e
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management		,,,	
		لــــا	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 23			74
	If there are material differences in voting rights among members of the governing body, or if the governing	. y.	· ,	134
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	'		
þ	Enter the number of voting members included in line 1a, above, who are independent 23], ,]		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	35	,	,
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	<u>·</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		1	
	persons other than the governing body?	7b_		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1 4	ķ	(;•
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			,
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	, ,	`.	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent		·	+ 3:
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			· * '
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		, 1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			, * ,
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		**	7 1
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	<u>'</u>	* *	11 1 4 T
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, FL, GA	<u>,IL</u> ,	KS.	<u>, KY</u>
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3))	s only) a	avaılal	ole
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ıal	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Lisa Bowen, CFO - 703-373-0933			
	2900 Crystal Drive, 6th Floor, Arlington, VA 22202			
832006	See Schedule O for full list of states	Form	990	(2018)

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees, and former such persons

Check this box if neither the organization no	or any related o	orga	nıza	tion	con	npen	sat	ed any current officer, d	rector, or trustee	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(40		Pos		l than c	one	Reportable	Reportable	Estimated
	hours per	box.	unie:	ss per	rson ı	s both	an	compensation	compensation	amount of
	week	\vdash	cer an	dad	recto	r/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	5	بو			ated		organization	(W-2/1099-MISC)	from the
	related	stee	trust		يو ا	bens		(W-2/1099-MISC)		organization
	organizations below	E I	lonal		gloy	ទីខ្ល				and related organizations
	line)	Individual trustee or director	institutional trustee	Officer	Кеу етрюуее	Highest compensated employee	отше			Organizations
(1) Representative Jason Saine, NC	1.00	=	=		_		_			
Chair		X		X				0.	0.	0.
(2) Senator Wayne Niederhauser, UT	1.00									
First Vice Chair	-	Х		X		<u> </u>		0.	0.	0.
(3) Senator Andre Cushing, ME	1.00								_	_
Second Vice Chair		Х		X			L	0.	0.	0.
(4) Representative Alan Clemmons,	1.00	. :		l						
SC; Treasurer		Х	_	X		<u> </u>		0.	0.	0.
(5) Speaker Philip Gunn, MS	1.00	ļ					1			
Secretary	1 00	X		X		<u> </u>	<u> </u>	0.	0.	0.
(6) Senator Jim Buck, IN	1.00	.,		,,						_
Immediate Past Chair	1 00	X	_	X	_	┢	├	0.	0.	0.
(7) Senator Joel Anderson, CA	1.00	Ų.						0.	0.	0.
Director	1 00	X	_			-	⊢	0.	0.	•
(8) Delegate Kathy Byron, VA	1.00	x						0.	0.	0.
Director	1 00	^	\vdash	├		┢	⊢		0.	<u> </u>
(9) Senator Gary Daniels, NH	1.00	Ų,					ļ	0.	0.	0.
Director	1.00	X		\vdash	⊢	⊢	-	<u> </u>	0.	
(10) Representative Dave Frizzell, IN; Director	1.00	x					1	0.	0.	0.
(11) Representative Yvette Herrell,	1.00	^	_	\vdash	╁	┼	 	- 0.	•	•
NM; Director	1.00	x						0.	0.	0.
(12) Senator Brian Kelsey, TN	1.00					t	t			
Director		x						0.	0.	0.
(13) Representative Phil King, TX	1.00						T			
Director		X						0.	0.	0.
(14) Representative Dawn Pettengill,	1.00						Г			
IA; Director		X						0.	0.	0.
(15) Representative John Piscopo, CT	1.00									
Director		X	L		$oxed{oxed}$			0.	0.	0.
(16) Representative David Reis, IL	1.00	1		Ì						_
Director	1	X	ļ		<u> </u>	<u> </u>	 	0.	0.	0.
(17) Representative Bill Seitz, OH	1.00	 								_
Director	<u>L., , </u>	Х	<u> </u>	Ц.			<u> </u>	0.	0.	0.

_	Total Harrison of Marriadalo (Molading Bot Not Million to Molad above) with resolution many respect of reportation			
	compensation from the organization			8
			Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CMI Communications, 400 Mile Crossing Blvd., Rochester, NY 14624	Audio Visual	223,311.
2 Total number of independent contractors (including but not limited to those	e listed above) who received more than	3

Form 990 American	Legisla	ti	ve	E	хc	ha	ng	e Council	52-014	0979
Part VII Section A. Officers, Directors, To	rustees, Key Er	nplo	yee	s, ar	nd H	ligh	est (Compensated Employe	es (continued)	,
. (A) Name and title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) Wilhelm Meierling Chief Marketing Officer	40.00				x			186,074.	0.	8,400.
(28) Jonathan Williams Chief Economist	40.00	-			x			162,294.	0.	20,731.
(29) Bartlett Cleland	40.00				Â					, , , , , ,
General Counsel (30) Bob Williams	40.00	_			_	Х	ļ	145,209.	0.	5,748.
Senior Fellow		_				х	_	137,370.	0.	4,849.
(31) Marie Vulaj VP-Partnerships & Engagements	40.00					х		108,672.	0.	17,270.
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										,
						_	_			
		_								
		-								
									 11	
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	_							-	-	
		<u> </u>	ļ			_	<u> </u>			
		-								
		_								
					-	 				
						<u> </u>				
Total to Part VII, Section A, line 1c								739,619.		56,998.

Co. Billed	range, e state	· r-ne i	Check if Schedule O conta	ains a response	or note to any lin	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts st	1	а	Federated campaigns	1a					
rar		b	Membership dues	1b					
S, G		C	Frindraising events	10	545,106.				
Sift. Jar		d	Related organizations	1d					
imi		е	Government grants (contributi	ons) 1e					
tior S		f	All other contributions, gifts, grant	ts, and					
ibu			similar amounts not included above	/e _1f	7,948,880.				
Contributions, Gifts, Grants and Other Similar Amounts		g	Noncash contributions included in lines	1a-1f \$				ALL CONTROL	
<u>2 g</u>		h	Total. Add lines 1a-1f			8,493,986.	Pitti Salaman (1996)	ENGLISHED AVEN	
					Business Code			经验的证明现实并经验	
<u>ic</u>	2	_	Conferences/seminars		900099	990,615.	990,615.		
e S		b	Membership dues		900099	67,638.	67,638.		
n S (en)		C			_				
grar Bey		d			• ,				
Program Service Revenue		e	All ables processes assume and				· · · · · · · · · · · · · · · · · · ·		<u>'</u>
-			All other program service reve	nue		1,058,253.		-78551512 3-1/2010 V	THE LANGUE THE PARTY OF THE PAR
_	3	9	Total. Add lines 2a-2f Investment income (including	duudande untere		2,000,100	A refresh true a retrieve to not not how	EN AN	Seen See Seed order hand de l'A Mille
	3		other similar amounts)	dividends, intere	.s., and	12,636.			12,636.
	4		Income from investment of tax	exempt bond o	roceeds				· · · · · · · · · · · · · · · · · · ·
į.	5		Royalties	cexompt bond p					
.	Ĭ		, ioyanioo	(i) Real	(ii) Personal	ROTE DE L'ALLEMENT DE L'AL	With Early Walks		HAVE CHARLE
	6	а	Gross rents	-	1				
	77		Less rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)						
-	7	a	Gross amount from sales of	(i) Securities	(ii) Other			Tanamaioghidalbandim (Filipun)	
			assets other than inventory						
		b	Less cost or other basis	1					
			and sales expenses						
		С	Gain or (loss)	`			NAME OF THE PROPERTY OF THE PR	LESS OF THE STATE	
		d	Net gain or (loss)			Contraction Contract (Sec. Str. et al., Str.	Langer to the control of the control	MANUFARRY NOTAL MENT . NO CONTAIN	ar ex. v supported to see included
g.	8	а	Gross income from fundraising	-					
eun				,106. of		爱教·美教教· 格			
ev.			contributions reported on line	1c) See	*				
Other Revenu			Part IV, line 18	а					
the state of			Less direct expenses	. b	327,361.	1.46.27.46.26.66.1	Elistado Pasas da Elis	Matronally and	-207 157.
			Net income or (loss) from fund	-	P	-207,157.	The last of the second		PARADARE REMARKS
	9	a _.	Gross income from gaming ac		,				
			Part IV, line 19	а					
			Less' direct expenses Net income or (loss) from gam	b b		Market Constitution	Page Carreson Laborator Andrea	A COMPARED SERVICE TO SERVICE	LIFERICA PERMINECIPIE EN PAREN
			Gross sales of inventory, less	=				vacheana.	
	10	а	and allowances	a					
		h	Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory				PARTITION OF THE PARTIT	Mich 130 State - Free Par Sea St. 12 Take	I P P P P P P P P P P P P P P P P P P P	- TEN AS THE EMPIRE COMPANY OF	
				Business Code	WALLEY LOOK OF THE	535524350045VF	SEATTH REPORT		
	11	а	Other		900099	200.	200.	Fine Fire Street	- store des some S-11
		b							
		c					•)
		d	All other revenue						<i>f</i>
		е	Total. Add lines 11a-11d		<u> </u>	200.		and the second	"特别和你,在这些所
	12		Total revenue See instructions			9,357,918.	1,058,453.	0.	-194,521.

17 8 (11)	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe		mplete column (A)					
	Check if Schedule O contains a response or note to any line in this Part IX								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,500.	7,500.						
2	Grants and other assistance to domestic								
	individuals See Part IV, line 22				Line Character and section and an experience				
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign								
	individuals. See Part IV, lines 15 and 16		· · · · · · · · · · · · · · · · · · ·						
4 5	Benefits paid to or for members Compensation of current officers, directors,		. 1"	authorati Bul ilik lik + neu liberation Seberation an	AND SERVICES AND A RESERVE LANGUAGE SERVICES AND AND ADDRESS OF SERVICES AND A				
3	trustees, and key employees								
6	Compensation not included above, to disqualified			-					
Ŭ	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)	1,183,526.	892,701.	266,099.	24,726.				
7	Other salaries and wages	2,570,834.	2,086,495.	209,576.	24,726. 274,763.				
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)	67,816.	54,023.	8,251.	5,542. 29,952.				
9	Other employee benefits	277,077.	54,023. 232,314.	14,811.	29,952.				
10	Payroll taxes	254,025.	202,360.	30,907.	20,758.				
11	Fees for services (non-employees)								
а	Management								
b	Legal	41,332.	33,123.	4,911.	3,298. 4,323.				
С	Accounting	54,390.	43,630.	6,437.	4,323.				
d	Lobbying		ENDERGO PARTIES OF THE CONTROL OF THE COST OFFI	THE CONTRACT CONTRACTOR OF THE PROPERTY OF THE	76.000				
е	Professional fundraising services. See Part IV, line 17	76,098.			76,098.				
f	Investment management fees								
g	Other (If line 11g amount exceeds 10% of line 25,	246 221	167 300	24,601.	54,350.				
	column (A) amount, list line 11g expenses on Sch 0.)	246,331.	167,380. 16,500.	24,601.	34,330.				
12	Advertising and promotion	16,500. 461,166.		27,776.	107,097.				
13	Office expenses	152,351.	122,144.	18,070.	12,137.				
14	Information technology	132,331.	122,144.	10,070.	12,137.				
15	Royalties	412,858.	330,865.	49,047.	32,946.				
16 17	Occupancy Travel	269,200.	264,031.	167.	5,002.				
17 18	Payments of travel or entertainment expenses	20372001	201/0020						
10	for any federal, state, or local public officials	542,362.	483,186.	59,176.					
19	Conferences, conventions, and meetings	1,737,785.		65,404.	7,135.				
20	Interest	1,022.	819.	121.	82.				
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	204,198.	163,643.	24,260.	16,295.				
23	Insurance	52,049.	43,708.	4,990.	3,351.				
24	Other expenses. Itemize expenses not covered								
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)								
	amount, list line 24e expenses on Schedule 0.) Subscriptions/research	257,894.	253,931.	544.	3,419.				
a	Dues and membership	185,319.	179,320.	5,323.	676.				
D	Bad debt	120,800.		120,800.					
ن م	Provision for UBI tax	6,362.		6,362.					
u	All other expenses	39,873.	37,415.	1,774.	684.				
25	Total functional expenses. Add lines 1 through 24e	9,238,668.	7,606,627.	949,407.	682,634.				
26	Joint costs. Complete this line only if the organization		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
~~	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here if following SOP 98-2 (ASC 958-720)								
-		· · · · · · · · · · · · · · · · · · ·			Form 990 (2018)				

Form 990 (2018)
Part X Balance Sheet

S. Alt. Area	170-10	Check if Schedule O contains a response or note to any line in this Part X	 		·
	•	/	(A)		(B)
			Beginning of year		End of year
	• •	Cash - non-interest-bearing -	708,972.	1	847,132.
	1	Savings and temporary cash investments	3,214,855.	2	3,150,851.
	2	Pledges and grants receivable, net	1,049,300.	3	1,076,342.
	3		152,858.	<u> </u>	276,104.
	4	Accounts receivable, net Loans and other receivables from current and former officers, directors,		Tierly:	
	5	trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L	hitting and a second state of the county as seen	rerento 5	12-1 and the man of the real contract of the beautiful and
'	_	Loans and other receivables from other disqualified persons (as defined under		小推翻	
	6	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
	į		sterling and her to their likes to be a set of a finish attended to	6	PART AND AN ACCOUNT.
Assets	-	employees' beneficiary organizations (see instr). Complete Part II of Sch L. Notes and loans receivable; net	* * * * * * * * * * * * * * * * * * * *	7	Dec. 9 No. 1 Co.
Ass	7			8	
`	8	Inventories for sale or use	388,269.	9	252,393.
	40-	Prepaid expenses and deferred charges	PROPERTY SERVICE SERVI	WHA.S	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 1,642,697.			
	٠,	006 440			656,255.
		Less accumulated depreciation [10b] 986,442. Investments - publicly traded securities	022,0321	11	
	11	Howestments - other securities. See Part IV, line 11	111,875.	12	112,156.
		Investments - program-related See Part IV, line 11		13	
	13 14			14	
		Intangible assets Other assets See Part IV, line 11		15	• •
	15 16	Total assets. Add lines 1 through 15 (must equal line 34)	6,438,760.	16	6,371,233.
	17	Accounts payable and accrued expenses	903,650.	17	872,986.
	18	Grants payable	7,7,7,7,7	18	
	19	Deferred revenue	214,286.	19	181,398.
	20	Tax-exempt bond liabilities		20	, -
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees,		連織物	
Liabilities		key employees, highest compensated employees, and disqualified persons			
þili		Complete Part II of Schedule L	-	22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	,	24	1
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of		,	
٠.,	+	Schedule D.	1,049,781.	25	926,556.
	26	Total liabilities. Add lines 17 through 25	2,167,717.	26	1,980,940.
	,	Organizations that follow SFAS 117 (ASC 958), check here X and		THE	
. ₍ ()		complete lines 27 through 29, and lines 33 and 34.			
če	27	Unrestricted net assets	1,812,348.	27	2,182,541.
alar	28	Temporarily restricted net assets	2,458,695.	28	2,207,752.
Ř	29	Permanently restricted net assets		29	
Ĕ	,	Organizations that do not follow SFAS 117 (ASC 958), check here			
Net Assets or Fund Balances		and complete lines 30 through 34	"君体"的"特别"	THE PARTY NAMED IN	
ts c	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds		30	
SSe	31	Paid in or capital surplus, or land, building, or equipment fund		31	
Ĭ,	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances Total liabilities and net assets/fund balances	4,271,043.	- 33	4,390,293.
	34	Total liabilities and net assets/fund balances	6,438,760.	34	6,371,233.
		• •		I^{-}	Form 990 (2018)

	990 (2018) American Legislative Exchange Council	<u>52-0:</u>	140979	Page	<u>e 12</u>
Pai	TXI Reconciliation of Net Assets			_	
	Check if Schedule O contains a response or note to any line in this Part XI			[
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,357	<u>,91</u>	8.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,238		
3	Revenue less expenses Subtract line 2 from line 1	3	119		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,271	<u>,04</u>	<u>3.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	4,390	,29	3.
Pai	Tinancial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
			9	Yes	No
1	Accounting method used to prepare the Form 990 CashX Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.	數學是	prist of	
2a			2a	Lide 4	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both		5. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		100 m
	Separate basis Consolidated basis Both consolidated and separate basis		18. 19. 5mg 18.		機で変
b	Were the organization's financial statements audited by an independent accountant?		2b	X	> → . T
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both			教育	
	Separate basis X Consolidated basis Both consolidated and separate basis		新州	4 3850	18 JUST
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	20 mm 10	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche		Fig.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audıt		}	
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	99 U (2	2018)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number

52-0140979 American Legislative Exchange Council Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(IV). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 l activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. _____ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations q Provide the following information about the supported organization(s) (iv) Is the organization listed (iii) Type of organization (v) Amount of monetary (vi) Amount of other (I) Name of supported (ii) EIN ing document in your gove (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support (f) Total (b) 2015 (d) 2017 (e) 2018 Calendar year (or fiscal year beginning in) (a) 2014 (c) 2016 1 Gifts, grants, contributions, and membership fees received (Do not 8765064. 8493986.39757643. 8873957. 6231036. 7393600. include any "unusual grants.") 2. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 8873957. 8765064. 8493986.39757643. 7393600. 6231036. Total, Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, 3922658 column (f) 35834985. 6 Public support. Subtract line 5 from line Section B. Total Support (d) 2017 (c) 2016 (e) 2018 (f) Total Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 8765064. -8493986. 39757643 6231036. 7393600. 8873957. 7 Amounts from line 4 " Gross income from interest, dividends, payments received on securities loans, rents, royalties, 2,528 2,971 3,897 6,463. 12,636. and income from similar sources 9. Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital 476,717. 476,674 200. 1907093. 476,751. 476,751. assets (Explain in Part VI) -5,468,36812 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 85.95 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 88.14 15 Public support percentage from 2017 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 Ar Part III Support Schedule for O	nerican L	egislative	Exchange	e Council	52-014	0979 Page 3
L						este a faile to
. (Complete only if you checked to qualify under the tests listed be			organization failed	to quality under Pa	art II If the organiz	ation fails to
Section A. Public Support	low, please comp	nete Part II)	 -			
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and	(a) 2014	(0) 2013	(0)2010	(0) 2017	(6) 2010	/// / / / / / / / / / / / / / / / / / /
membership fees received (Do not						/
include any "unusual grants ")					/	/
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513				<i></i>		_
4 Tax revenues levied for the organ-				/	1	İ
ization's benefit and either paid to				/	1	1
or expended on its behalf					ļ	-
5 The value of services or facilities	İ					
furnished by a governmental unit to the organization without charge			<u> </u>			
6 Total. Add lines 1 through 5			,	/		
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received			1			
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)						
Section B. Total Support	•		/			
Calendar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015 /	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						<u> </u>
c Add lines 10a and 10b	,		·			
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI) 13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	the organization's	first, second, thire	d. fourth, or fifth ta	x vear as a section	n 501(c)(3) organiz	ation.
check this box and stop here	/		, , -	•		▶ □
Section C. Computation of Public	Support Per	centage				
15 Public support percentage for 2018 (lin			column (fi)		15	g
16 Public support percentage from 2017			,O.G. (1),		16	9
Section D. Computation of Invest					1 10 1	<i>'</i>
17 Investment income percentage for 20			ne 13. column (fl)		17	Ç
18 Investment income percentage from 2			,		18	<u> </u>
19a 33 1/3% support tests - 2018. If the			on line 14. and line	e 15 is more than 3		
more than 33 1/3%, check this box and	d stop here. The	organization quali	fies as a publicly s	supported organiza	tion	
b 33 1/3% support tests - 2017. If the						*IIO
line 18 is not more than 33 1/3%, chec 20 Private foundation. If the organization						P <u></u>

Schedule A (Form 990 or 990-EZ) 2018 American Legislative Exchange Council

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and If you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Par	Supporting Organizations (continued)	
	•	Yes No
11	Has the organization accepted a gift or contribution from any of the following persons?	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	
	below, the governing body of a supported organization?	11a
b	A family member of a person described in (a) above?	11b
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c
<u>Sec</u>	tion B. Type I Supporting Organizations	
		Yes No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	
	controlled the organization's activities. If the organization had more than one supported organization,	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	firemental an implemental input access
2	Did the organization operate for the benefit of any supported organization other than the supported	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	
	supervised, or controlled the supporting organization.	2
Sec	tion C. Type II Supporting Organizations	
		Yes No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	
	or management of the supporting organization was vested in the same persons that controlled or managed	
	the supported organization(s).	1
Sec	tion D. All Type III Supporting Organizations	
		Yes No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	SUCHER BY PART REPORT
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2
2	the organization maintained a close and continuous working relationship with the supported organization(s)	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	
		3
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	ructions).
' a	The organization satisfied the Activities Test. Complete line 2 below.	
b	The organization is the parent of each of its supported organizations. Complete line 3 below	
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity	(see instructions).
2	Activities Test. Answer (a) and (b) below.	Yes No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	Maria day esa
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	
	how the organization was responsive to those supported organizations, and how the organization determined	
	that these activities constituted substantially all of its activities	2a
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	
	reasons for the organization's position that its supported organization(s) would have engaged in these	
	activities but for the organization's involvement	2b
3	Parent of Supported Organizations Answer (a) and (b) below.	
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	
-	trustees of each of the supported organizations? Provide details in Part VI.	3a
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b

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Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	-	_	'art VI) See instructions. Al
_	other Type III non-functionally integrated supporting organizations must co	omplete S	Sections A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
_2	Recoveries of prior year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			1
	maintenance of property held for production of income (see instructions)	_6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other	第15人要 1.66人等		
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4	,	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		,
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2	为"特殊的"。除此,该种种种种。	,
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	e de notoeras	
4	Enter greater of line 2 or line 3	4	14-14-14-14-14-14-14-14-14-14-14-14-14-1	
5	Income tax imposed in prior year	5	阿克斯科斯 2000年時期	,
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		CARLES STREET, DESCRIPTION OF THE PROPERTY OF	
-	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional			nization (see
•	instructions)	, -9), Fire 13 413	1

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	ndule A. (Form 990 or 990 EZ) 2018 American Legi			2-0140979 Page 7
	ion D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
-	organizations, in excess of income from activity	a parposso or supported		•
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		
	Amounts paid to acquire exempt-use assets			_
5	Qualified set aside amounts (prior IRS approval required)	,		
6	Other distributions (describe in Part VI) See instructions	· · · · · · · · · · · · · · · · · · ·		
7	Total annual distributions. Add lines 1 through 6.			,
8	Distributions to attentive supported organizations to which the	ne organization is responsive		, , , , , , , , , , , , , , , , , , , ,
	(provide details in Part VI). See instructions			
9	Distributable amount for 2018 from Section C, line 6		-	
10	Line 8 amount divided by line 9 amount		•	
Sect	ion E - Distribution Allocations (see instructions)	(ı) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			,,
2	Underdistributions, if any, for years prior to 2018 (reason-			
_	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2018			
	From 2013 1 .	THE TRUE TO SERVICE AND A SERV	拉斯斯拉斯特斯斯拉斯尼	emiliande sina)
	From 2014		对点的不是大概等的的表示	
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	From 2016		AND CHARGE AND THE COURTS OF T	
	From 2017			台灣和於古典的
f	Total of lines 3a through e		CECESTED PARTY.	
q	Applied to underdistributions of prior years	HEROTE WATER		ADDISESSED FOR FIRST
	Applied to 2018 distributable amount	对加州公安河流河中,伊州州	为中华的人的主义的	
j	Carryover from 2013 not applied (see instructions)		Charling the Control of the Control	高端的原则的原则的
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			TRACTURE TO THE SECOND
4	Distributions for 2018 from Section D,			
	line 7 ° \$			
а	Applied to underdistributions of prior years	學問題等如此的影響的		计算证明集集的
b	Applied to 2018 distributable amount		White the state of	,
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2018, if			
	any Subtract lines 3g and 4a from line 2 For result greater		`	
	than zero, explain in Part VI. See instructions		A SAN THE STATE OF	
6	Remaining underdistributions for 2018 Subtract lines 3h			,
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			PROFESSOR OF THE PROFES
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c	Pagadago , desir ede , see argento, nosse s see	MER SHAREST STREET, SAN TO SERVE STREET, SAN TO SEN	THE PROPERTY OF THE PROPERTY O
8	Breakdown of line 7	THE PERSON AND DAYS OF THE PARTY.		
a	Excess from 2014			
b	Excess from 2015	In the World Helm Strate Server to the same server		CONTRACTOR OF THE PROPERTY OF THE PARTY OF T
c	Excess from 2016	CHARLES AND AND AND AND AND AND AND AND AND AND	COLUMN TO LESS CONTRACTOR CONTRAC	
d	Excess from 2017			
	F	TETTER #10000000 1000000 10000000 10000000000	LOTE TO BE THE TAXABLE PROPERTY OF THE PARTY	THE REPORT OF THE PROPERTY OF

Schedule A (Form 990 or 990-EZ) 2018

Schedule A.(Form 990 or 990-E.	Z) 2018 America	n Legislative	<u>Exchange</u>	Council Council	52-0140979	Page 8
Part VI Supplemental Part IV, Section A, line 1: Part IV. Sec	Information. Provinces 1, 2, 3b, 3c, 4b, 4tion D, lines 2 and 3, F	ride the explanations requ 4c, 5a, 6, 9a, 9b, 9c, 11a, Part IV, Section E, lines 1c, Section E, lines 2, 5, and 6	ired by Part II, line 1 11b, and 11c; Part , 2a, 2b, 3a, and 3b	10, Part II, line 17a c IV, Section B, lines , Part V, line 1, Part	1 and 2, Part IV, Section V, Section B, line 1e, Pa	n C, art V,
			- , 			·
Schedule A, Part	II, Line 1	0, Explanatio	n for Othe	er Income:		
Miscellaneous						
2018 Amount: \$	200.					
Sublease income						
2014 Amount: \$	476,751.		· · · · · · · · · · · · · · · · · · ·			•
2015 Amount: \$	476,751.		 			
2016 Amount: \$	476,717.					
2017 Amount: \$	476,674.				·····	
			•			
	, 				· · · · · · · · · · · · · · · · · · ·	,
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SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information. If the organization answered "Yes." on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II·B. Do not complete Part II·A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• Section 5	01(c)(4), (5), or (6) organizat	ons Complete Part III			
Name of orga				Empl	oyer identification number
	America	n Legislative Exc	change Counc	cil	52-0140979
Part I-A	Complete if the org	anization is exempt unde	er section 501(c)	or is a section 527 or	ganization.
		ation's direct and indirect politica	al campaign activities i		
	campaign activity expenditi			▶\$	
3 Voluntee	r hours for political campai	gn activities			
Part I-B	Complete if the org	anization is exempt unde	er section 501(c)(3).	
1 Enter the	amount of any excise tax	ncurred by the organization und	er section 4955	▶\$	
2 Enter the	amount of any excise tax	ncurred by organization manage	rs under section 4955	▶ \$	
3 If the org	anization incurred a sectioi	n 4955 tax, did it file Form 4720 t	for this year?		Yes Mo
4a Was a co	rrection made?				Yes No
b If "Yes,"	describe in Part IV				
Part I-C	Complete if the org	anization is exempt unde	er section 501(c),	except section 501(c)(3).
1 Enter the	amount directly expended	by the filing organization for sec	tion 527 exempt funct	ion activities	
2 Enter the	amount of the filing organ	zation's funds contributed to oth	ner organizations for se	ection 527	
exempt f	unction activities			▶\$	
3 Total exe	mpt function expenditures	Add lines 1 and 2 Enter here at	nd on Form 1120-POL,	ı	
line 17b				▶\$	
4 Did the f	ling organization file Form	1120-POL for this year?			Yes No
5 Enter the	names, addresses and em	ployer identification number (EIN	I) of all section 527 po	litical organizations to which	the filing organization
		ion listed, enter the amount paid			
contribut	ions received that were pro	emptly and directly delivered to a	separate political orga	anization, such as a separate	e segregated fund or a
political a	action committee (PAC) If a	additional space is needed, provi	de information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
	·				
<u> </u>				-	

Schedule C (Form 990 or 990 EZ) 2018 Part IFA: Complete if the org	Ameri	can Le	gislative E	xchange Cour	ncil 52-0	140979 Page 2
section 501(h)).	,		inprantaci cocure.	· · · · · · · · · · · · · · · · · · ·		
A Check ▶ ☐ If the filing organiza	ation belon	gs to an affi	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and sha		-	- ' '	· ·	•	
- —			nd "limited control" pro	visions apply.		
Lim	its on Lob	oying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to infl		lio opinion (arana ranta labbuna)			
1a Total lobbying expenditures to inflb Total lobbying expenditures to infl						
c Total lobbying expenditures (add I		•	iy (direct lobbying)			
d Other exempt purpose expenditures		110)			9,489,931.	
e Total exempt purpose expenditure		s 1c and 1d	١		9,489,931.	
f Lobbying nontaxable amount Ent	•		•	a columne	624,497.	
					Permanda de la companya de la compan	拉丁斯尼斯尼亚金加 尼亚亚
If the amount on line 1e, column (a) of Not over \$500,000	או (ט) וא.		bying nontaxable am the amount on line 1e	ount is:		
Over \$500,000 but not over \$1,00	0.000					
Over \$1,000,000 but not over \$1,50			00 plus 15% of the exc 00 plus 10% of the exc			
Over \$1,500,000 but not over \$1,5			00 plus 5% of the exce			
Over \$17,000,000	,000,000	\$1,000,		55 0 0 0 1 0 1,500,000.		
Over \$17,000,000		\$1,000,				
g Grassroots nontaxable amount (er	ter 25% of	line 1ft	···		156,124.	Satisting the sate, sate, sate, has a satisfic
h Subtract line 1g from line 1a. If zer		•			0.	
i Subtract line 1f from line 1c If zero					0.	
j If there is an amount other than ze			line 1: did the organiza	ation file Form 4720		-
reporting section 4911 tax for this			into 11, did the organiza	200111101101111111111111111111111111111	Г	Yes No
(Some organizations t			eraging Period Under		of the five columns be	
,			ate instructions for lir			
	Lobi	ying Expe	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	_ (a)	2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	56	4,630.	600,779.	659,537.	624,497.	2,449,443.
b Lobbying ceiling amount (150% of line 2a, column(e))						3,674,165.
c Total lobbying expenditures				,	,	
d Grassroots nontaxable amount	14	1,158.	150,195.	164,884.	156,124.	612,361.
e Grassroots ceiling amount (150% of line 2d, column (e))						918,542.
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990 EZ) 2018 American Legislative Exchange Council 52-0140979 Page 3

Part 138 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(6	3)	(k	o)
of the lobbying activity	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers?				
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? 				
g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities?		建於某情的 為可能		
j Total Add lines 1c through 1: 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			不可能 不可能 不可能 不可能 不可能 不可能 不可能 不可能	
Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), or sec		
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	501(c)(5), or sec		No e 3, is
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 	ss	2a 2b 2c 3		7270708343646
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group I instructions), and Part II-B, line 1. Also, complete this part for any additional information.	ist); Part II-	A, lines 1 a	nd 2 (see	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990.

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Inspection

Name of the organization

American Legislative Exchange Council

Employer identification number 52-0140979

Pa	rt I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor as		sed only
	for charitable purposes and not for the benefit of the donor or	• •	•
	impermissible private benefit?	, , ,	Yes No
Pa		ganization answered "Yes" on Form 990, P	art IV, line 7
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e		rically important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	acture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	ifter 7/25/06, and not on a historic structur	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the o	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	ement is located >	
5	Does the organization have a written policy regarding the pen	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and enforcing conse	ervation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	on easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h))(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense s	tatement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ion's financial statements that describes th	e organization's accounting for
	conservation easements		
Pai	t III Organizations Maintaining Collections of		er Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8	<u> </u>
1a	If the organization elected, as permitted under SFAS 116 (AS	•	
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furtherand	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	pes these items	
þ	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of publ	ic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financial (gain, provide
	the following amounts required to be reported under SFAS 11	16 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		

		<u>n Legislat</u>							40979	
Par	tilli Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, o	<u>r Othe</u>	r Simila	r Assets	(continue	ed)
3	Using the organization's acquisition, accessi	on, and other record	ls, chec	any of the fo	ollowing that	t are a si	gnıficant	use of its c	ollection it	ems
	(check all that apply)									
а	Public exhibition	•	d 🗀	Loan or exch	nange progra	ams				
b	Scholarly research	•	• 🗔	Other						
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further the	e organizatio	on's exe	mpt purp	ose in Part	XIII	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical treas	ures, or othe	er sımılaı	rassets	_		
	to be sold to raise funds rather than to be ma	aintained as part of t	he orga	nization's col	ection?				Yes	No
Par	tilM Escrow and Custodial Arran	gements. Compl	ete if the	e organization	answered '	"Yes" or	Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Par	t X, line 21								
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contributions	or other as:	sets not	ıncluded		_	
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table				,		
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1 <u>f</u>	<u> </u>		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for	escrow or cu	stodial acco	unt liabi	lity?		Yes	☐ No
	If "Yes," explain the arrangement in Part XIII									
Par	tiV Endowment Funds. Complete	f the organization ai	nswered	"Yes" on For	m 990, Part	IV, line	10			
		(a) Current year	(b) [[]	Prior year	(c) Two yea	rs back	(d) Three	years back	(е) Four y	ears back
1a	Beginning of year balance		<u> </u>							
b	Contributions	··	ļ							
С	Net investment earnings, gains, and losses		<u> </u>							
d	Grants or scholarships	-								
е	Other expenditures for facilities		}							
	and programs		<u> </u>							
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end baland	e (line 1	g, column (a)	held as					
а	Board designated or quasi-endowment		%							
b	Permanent endowment >	%								
С	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held an	d administe	red for tl	ne organi	zation	_	
	by.								Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	tions listed as requi	red on S	Schedule R?					3b	
4	Describe in Part XIII the intended uses of the		wment	funds						
Par	tiVI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" on Form 99	0, Part I	V, line 11a. S	ee Form 990), Part X	line 10			
	Description of property	(a) Cost or		(b) Cost			Accumula		(d) Book	value
		basis (invest	ment)	basis (other)	de	preciatio	n		
1a	Land									
b	Buildings			ļ.,		ļ	100 -			
С	Leasehold improvements				4,580.		430,5			,007.
d	Equipment				7,195.		446,0			,101.
<u>e</u>	Other			18	0,922.		109,7	75.		,147.
Total	. Add lines 1a through 1e (Column (d) must e	aual Form 990, Part	X. colur	nn (B), line 10	Oc.)				656	,255.

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII [X.]

Schedule D (Form 990) 2018

Sche	dule D (Form 990) 2018 American Legislative B			140979	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial S	•	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.			
1	Total revenue, gains, and other support per audited financial statements		1	<u>9,953,</u>	<u>529.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1			
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b 53,250.			
С	Recoveries of prior year grants	2c	ĺĺ		
d	Other (Describe in Part XIII)	2d 542,361.			
е	Add lines 2a through 2d		2e	595,	$\frac{611.}{2.12}$
3	Subtract line 2e from line 1		3	9,357,	<u>918.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
þ	Other (Describe in Part XIII)	4b			•
С	Add lines 4a and 4b		4c	0 257	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990. Part I. line	12.)	5	9,357,	918.
Pa	T XII Reconciliation of Expenses per Audited Financial	·	eturn	ı .	
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a		0.065	0.65
1	Total expenses and losses per audited financial statements		1	9,865,	967.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a 53,250.			
b	Prior year adjustments	2b	ĺ		
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d 574,049.		607	200
е	Add lines 2a through 2d		2e	627, 9,238,	<u> 299.</u>
3	Subtract line 2e from line 1		3	9,238,	<u> </u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1		
b	Other (Describe in Part XIII)		\vdash		•
С	Add lines 4a and 4b		4c	0 220	0.
5 Da	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I. line t XIII Supplemental Information.	e 18.)	5	9,238,	668.
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a ar		, Part X	, line 2, Part XI,	
ines	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide	e any additional information			
D	ct X, Line 2:				
Pai	t x, bine z:				
Ma.	nagement reviews and assesses all acti	witing appually to id	ont i	fre anse	
<u>nai</u>	agement reviews and assesses arr acti	vicies annually to id-	enc 1	Ly ally	
ah:	inges in the scope of the activities a	nd revenue cources and	a + r	e tav	
CIIC	inges in the scope of the activities a	ind revenue sources and	<u>u cı.</u>	le cax	
- ~ ~	eatment thereof to identify any uncert	ainty in income tay	For	the ve	a w
LIE	eachienc thereof to identify any uncert	armey in income cax.	FUL	che ye	<u>a r</u>
and	led December 31, 2018, management did	not identify any uncer	rtai	nty in	
<u> </u>	red becember 51, 2010, management did	not ruentry any unce	<u>r ca</u>	itcy in	
inc	ome tax requiring recognition or disc	closure in the financia	a 1		
T11(tome tax requiring recognition or disc	tosure in the limanti	<u> </u>		
e t s	tements.				
3 6 6	icemencs.	 			
	<u> </u>				
Dar	t XI, Line 2d - Other Adjustments:				
aı	c AI, line 2d Other Adjustments.				
R 🗕 T	venue of entities other than the Organ	uization included in t	he		
 /	ende of entitles other than the organ	III CIUGU III C			
~~×	solidated audited financial statement	s net of			
201	sollagted addited linancial statement	D, HEC OL			<u>`</u>
_ T +	mination entries.			215,0	00.
			Sched	ule D (Form 99	
332054	10-29-18		SCHED	אפ ווווטאן ע סוט (דטוווו	~, ZU 10

832054 10-29-18

	52-0140979 Page 5
Part XIII Supplemental Information (continued)	
Direct special event costs - included in expenses in the audit	ed financial
statements but included in net revenue on the Form 990.	327,361.
Total to Schedule D, Part XI, Line 2d	542,361.
Part XII, Line 2d - Other Adjustments:	
Expenses of entities other than the Organization included in	the
consolidated audited financial statements, net of	
elimination entries.	246,688.
Direct special event costs - included in expenses in the audi	ted financial
statements but included in net revenue on the Form 990.	327,361.
Total to Schedule D, Part XII, Line 2d	574,049.
•	

SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or If the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service	▶ Ge	to www.irs.gov/Form990 for inst	ruction	s and	the latest informati	on.		Inspection
Name of the organization								ntification number
		n Legislative Excl					<u> 52-0140</u>	
	sing Activities, complete this par	 Complete if the organization answ 	ered "Y	es" or	n Form 990, Part IV, I	ine 17	Form 990-EZ	filers are not
		sed funds through any of the follow	ing activ	ities. (Check all that apply			
a X Mail solicitat	=				overnment grants			
b X Internet and	email solicitations	s f Solicit	ation of	gover	nment grants			
c X Phone solici	tations	g 🗶 Specia	al fundra	using	events			
d X In-person so	licitations							
		or oral agreement with any individua				tees, o		
		art VII) or entity in connection with					X Yes	
	-	viduals or entities (fundraisers) purs	uant to	agree	ments under which th	ne fund	raiser is to be	•
compensated at le	east \$5,000 by the	organization						
(i) Name and addres or entity (fund		(ii) Activity	have c	Did aiser ustody itrol of utions?	(iv) Gross receipts from activity	tò (or fu	mount paid retained by) ndraiser d in col (i)	(vi) Amount paid to (or retained by) organization
Julie Shugar - 153	8 4th	Solicits funds on behalf	Yes	No	<u> </u>			
Street, New Orleans	B, LA	of ALEC's annual conf.		х	940,000.		18,797.	921,203.
Nork-Apex Adv 9	817 Gartell	Solicits funds on behalf					,	
Pl., Kensington, M	D 20895	of ALEC's annual conf.		х	806,250.		16,543.	789,707.
Donor Fundraising		Solicits funds on behalf						
6th St., #115, Aus	tin, TX	of ALEC's annual conf.		х	125,000.		40,758.	84,242.
		1		1				[
		 		-				
 				<u> </u>				
						ļ		
					<u> </u>	· · · · · ·		
			ļ					
Total					1,871,250.		76,098.	1,795,152.
3 List all states in whor licensing	ich the organization	on is registered or licensed to solicit	contrib	utions	or has been notified	it is ex	empt from re	gistration
	CA, CO, CT,	FL,GA,IL,KS,KY,LA,	MA,N	ID, N	ME, MI, MN, MS	, NC	,ND,NH,	NJ, MM, NY
		UT, VA, WA, WI, WV						
								
								
					 			

Sch Pa		e G (Form 990 or 990 EZ) 2018 America Fundraising Events. Complete if the	n Legislative ne organization answered	e Exchange Co "Yes" on Form 990, Part		0140979 Page 2 more than \$15,000
		of fundraising event contributions and gro				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					None	(add col (a) through
			Gala			col. (c))
			(event type)	(event type)	(total number)	001. (0)/
Revenue						
eve	1	Gross receipts	665,310.			665,310.
Œ						
	2	Less: Contributions	545,106.			545,106.
	3	Gross income (line 1 minus line 2)	120,204.			120,204.
	4	Cash prizes			· · · · · · · · · · · · · · · · · · ·	
	5	Noncash prizes				
es						
ens	6	Rent/facility costs	84,527.			84,527.
Direct Expenses						
ğ	7	Food and beverages	130,196.			130,196.
۵						
	8	Entertainment	4,518.			4,518.
	9	Other direct expenses	108,120.			108,120.
	10	Direct expense summary. Add lines 4 through			•	327,361.
	11		ine 3, column (d)			-207,157.
Pa	rt I		answered "Yes" on Form	990, Part IV, line 19, or i	reported more than	
		\$15,000 on Form 990-EZ, line 6a	····	T		T
Ð			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c))
Š						
_	1	Gross revenue		<u> </u>		
	_		,			
မွ	2	Cash prizes			·	
Expenses	_					
ž	3	Noncash prizes				
- 5		D 45 44				
Dire	4	Rent/facility costs				
	_	Other desert and a				
	5	Other direct expenses			Yes %	
	_	Moderate a taken	Yes %	Yes %		
	6	Volunteer labor	No	No	No No	
	_	Don't sure of the second	- 5 (d)			
	′	Direct expense summary Add lines 2 through	1 5 in column (a)			
	_	Not warned to a summary. Cultivast line 7	from los 1 column (d)			
	8	Net gaming income summary Subtract line 7	nonnine i, column (d)			<u> </u>
_	C-a	tor the eteto(e) in which the erganization condi	iote gaming activities			
		ter the state(s) in which the organization condu he organization licensed to conduct gaming a		etatos?		Yes No
		-				
٥	11	No," explain·				
	_		-			
100	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax v	/ear?	Yes No
		Yes," explain			, •	
	"					
						
	_					

Schedule G. (Form 990 or 990 EZ) 2018 American Legislative Exchange Council 52-0140979 Page 3
11 Does the organization conduct gaming activities with nonmembers?
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed
to administer charitable gaming?
13 Indicate the percentage of gaming activity conducted in
a The organization's facility %
b An outside facility
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records.
Name ▶
Address ▶
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount
of gaming revenue retained by the third party > \$
c If "Yes," enter name and address of the third party
Name
Address ▶
16 Gaming manager information
Name ▶
Gaming manager compensation > \$
Description of services provided
4
Director/officer Employee Independent contractor
17 Mandatory distributions:
a is the organization required under state law to make charitable distributions from the gaming proceeds to
retain the state gaming license?
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
organization's own exempt activities during the tax year > \$
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions
a hidil a pout total about the start of min think at poid poud it is a
Schedule G, Part I, Line 2b, List of Ten Highest Paid Fundraisers:
(i) Name of Fundraiser: Julie Shugar
(i) Address of Fundraiser: 1538 4th Street, New Orleans, LA 70130
(i) Name of Fundraiser: Donor Fundraising
(i) Address of Fundraiser: 1135 W. 6th St., #115, Austin, TX 78703
·

Schedule G (Form 990 or 990 EZ) Part IV. Supplemental Infor	American	Legislative	Exchange	Council	52-0140979	Page 4
Part ly Supplemental Infor	mation (continue	ed)	<u></u>			
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SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information

QUIOOpen to Publication

OMB No. 1545-0047

Name of the organization

American Legislative Exchange Council Employer identification number 52-0140979

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax indemnification and gross-up payments Personal services (such as maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III X Written employment contract Compensation committee [X] Compensation survey or study X Independent compensation consultant X Approval by the board or compensation committee X Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization. a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5b Any related organization? If "Yes" on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6b Any related organization? If "Yes" on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Regulations section 53 4958-6(c)?

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).

Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(I) (III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a)-(i)(a)	in Column (b) reported as deferred on prior Form 990
(1) Lisa Nelson	8	308,270.	80,000.	0	10,000.	18,471.	416,741.	0.
сво	: @	0	0	0	0	0	0	0.
(2) Lisa Bowen	Ξ	163,659.	10,000.	0	6,992.	22,405.	203,056.	0.
CFO	E	0	0	0	0	0	0.	.0
(3) Michael Bowman	Ξ	159,294.	5,000.	0.	6,600.	15,335.	186,229.	.0
VP - Policy	(E)	0.	0	0.	0.	0.	0.	.0
(4) Wilhelm Meierling	Ξ	176,074.	10,000.	0.	7,435.	965.	194,474.	0
Chief Marketing Officer	(E)	0	0	0	0	0	0.	0.
(5) Jonathan Williams	(i)	152,294.	10,000.	0.	6,520.	14,211.	183,025.	.0
Chief Economist	€	0	0	0	0.	0.	0.	0.
(6) Bartlett Cleland	Θ	140,209.	2,000.	0.	2,000.	748.	150,957.	0.
General Counsel	(ii)	0	0.	0.	0.	0.	0.	0.
	ω							
	(ii)							
	(i)							
	(ii)							
	Ξ							
	(II)							
	ω							
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	Ξ							
	(ii)							
	Ξ							
	<u>(ii)</u>							
	Θ							
	(ii)							
	Θ							
	Ξ							
	Ξ							
	Ξ							
	Θ							
	l (ii)							

Schedule J (Form 990) 2018

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Open to Public

OMB No 1545-0047

Inspection

► Go to www.irs.gov/Form990 for the latest information. Name of the organization

Employer identification number

Schedule O (Form 990 or 990-EZ) (2018)

52-0140979 American Legislative Exchange Council Form 990, Part III, Line 4d, Other Program Services: State Outreach Expenses \$ 775,329. including grants of \$ 0. Revenue \$ 0. Membership Expenses \$ 471,857. including grants of \$ 7,500. Revenue \$ 67,638. Form 990, Part VI, Section A, line 6: In accordance with the bylaws of ALEC, full membership shall be open to persons dedicated to the preservation of individual liberty, basic American values and institutions, productive free enterprise, and limited representative government, who support the purposes of ALEC, and who serve, or formerly served, as members of a state or territorial legislature, the United States Congress or similar bodies outside the United States. Form 990, Part VI, Section A, line 7a: Directors are elected each December. The Board shall consist of 23 members of which 18 directors are nominated and elected by the Board of Directors. Three Directors shall be nominated by the Board of Directors from a list of six nominees supplied by the State Chair, one of whom shall be the Chair of the State Chairs. Two Directors shall be elected by the Board of Directors from a list of four nominees supplied by the Task Force chairs, all four of whom shall be Task Force public sector chairs. Form 990, Part VI, Section A, line 8b:

ALEC does not maintain minutes for all committees, but decisions are taken

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O.(Form 990 or 990-EZ) (2018) Page 2 **Employer identification number** Name of the organization American Legislative Exchange Council 52-0140979 to the full board for approval and are documented. Form 990, Part VI, Section B, line 11b: The CFO reviews ALEC's Form 990. Such review takes place upon receipt of the draft Form 990 received from the independent public accounting firm who conducts the financial statement audit of ALEC. The review involves comparison of financial data in the Form 990 with the audited financial statements and review of all narrative information for accuracy and completeness. The CEO of ALEC then reviews the Form 990. Prior to filing, the public disclosure copy of the Form 990 is provided to the full Board of ALEC. Form 990, Part VI, Section B, Line 12c: ALEC has a written conflict of interest policy. Actual or perceived conflicts are addressed by the Board on a case by case basis. Form 990, Part VI, Section B, Line 15a: ALEC compares current salary rates with other non-profits by reviewing various Federal Form 990's to ensure the rates are competitive. The board of directors reviews and approves the compensation of the CEO. The CEO approves the compensation of all other employees, including key employees. Through the annual budget process, board approval of overall salary expense is obtained. Form 990, Part VI, Line 17, List of States receiving copy of Form 990: AK,AL,AR,AZ,CA,CO,CT,FL,GA,IL,KS,KY,LA,MA,MD,ME,MI,MM,MS,NC,ND,NH,NJ,NM,NY

OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

Name of the organization	Employer identification number
American Legislative Exchange Council	52-0140979
Form 990, Part VI, Section C, Line 19:	
ALEC makes these documents available upon request.	
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SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Part

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

2018

OMB No 1545-0047

Open to Public Inspection

Employer identification number 52-0140979

Go to www.irs.gov/Form990 for instructions and the latest information. Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 American Legislative Exchange Council Name of the organization

Direct controlling entity End-of-year assets **e** Total Income ਰ Legal domicile (state or foreign country) Primary activity 3 Name, address, and EIN (if applicable) of disregarded entity

(g) Section 512(b)(13) ŝ controlled entity? Yes × Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year Direct controlling entity status (if section Public charity 501(c)(3)) Exempt Code section District of Columbia 501(c)(4) ਉ Legal domicile (state or foreign country) Educate the public & gov't policy makers by providing nonpartisan research Primary activity Jeffersonian Project - 46-2233126 Name, address, and EIN of related organization 2900 Crystal Drive, 6th Floor Arlington, VA 22202 PartII

or Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2018

832161 10-02-18 LHA

52-0140979

Page 2

Schedule R (Form 990) 2018 American Legislative Exchange Council

| Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related. organizations treated as a partnership during the tax year

(e) (f) (h) (g) (k).	tincome Share of total Share of Disproportonate amount in box assets Ara Income assets Yes No F:1 (Form 1065) Yes No		
(c)	Direct c		
(b)	ctivity		
(a) (b) (b) (c) (c) (d) (d) (d)	Name, address, and EIN of related organization		

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				×	Yes	N _o
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	with one or more re	lated organizations listed II	n Parts II·IV?		\dashv	٦
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				L		×
b Gift, grant, or capital contribution to related organization(s)				Q	~	اب
c Gift, grant, or capital contribution from related organization(s)				10	× i	اب
d Loans or loan guarantees to or for related organization(s)				P	~	.
e Loans or loan guarantees by related organization(s)				1e	~	×
						\neg
f Dividends from related organization(s)				+	~	×
g Sale of assets to related organization(s)				19	~	اب
h Purchase of assets from related organization(s)				ŧ	~	×
i Exchange of assets with related organization(s)				÷	~	×
j Lease of facilities, equipment, or other assets to related organization(s)				-	*	×ſ
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×	×
I Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)			=	~	×
m Performance of services or membership or fundraising solicitations by related organization(s)	ıızatıon(s)			Ē	-	اید
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			t T	×	1
o Sharing of paid employees with related organization(s)				4	×	٢
				,	P	7,
				2	,	ءا،
 Reimbursement paid by related organization(s) for expenses 				5	+	√ [
r Other transfer of cash or property to related organization(s)				+	 ^	ן×
	•			1s	^	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ho must complete th	iis line, including covered r	elationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nvolved		
(1) Jeffersonian Project	N	223,335.	Fair Value			
(2) Jeffersonian Project		103,543.	Fair Value			1
(5)					ı	
(4)						
(5)						
832163 10-02-18			Schedul	Schedule R (Form 990) 2018	90) 20	<u>8</u>

Page 4

Part VI- Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

3	entage ership) 2018
	Own				 	980 E
8	General or managing partner?				 	For
9	-UBI box 20 ile K-1 065)					Schedule R (Form 990) 2018
3	ಕ್ಷ್ಮಿ ೨				 	
-	Ols allo			} 		
(5)	Share of end-of-year assets	i i				
9	Share of total income					
 -	Are all pariners sec 501(c)(3) orgs 7					
"	Sold Sold Action				-	
stment partnersnips	t income related, tax und 2-514)					
ion for certain inves	micile oreign ry)					
uctions regalding exclus	Pnmary activity					
that was not a related organization. See instructions regarding exclusion for certain investment partnerships	Name, address, and EIN of entity					

Schedule R.	(Form 990) 2018 Supplemental Info	American	Legislative	Exchange	Council	52-0140979	Page 5
Part VIII	Supplemental Info	mation.	A constant and a constant	1- D. O			
	Provide additional inform	ation for responses	to questions on Schedi	JIE H See Instruct	ions		
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